## Case 16-21524 Doc 1 Filed 07/01/16 Entered 07/01/16 14:05:46 Desc Main Document Page 1 of 43

| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | -                             |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | ■ Chapter 7                   |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: Identify Yourself  |  |   |  |
|-----|--|--|---|--|
|     |  | About Debtor 1:                                  | About Debtor 2 (Spouse Only in a Joint Case): |  |
| 1.  | Your full name   |  |   |  |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).        | Phillip First name  David Middle name            | First name  Middle name                       |  |
|     | Bring your picture identification to your meeting with the trustee.  | Brendle Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |  |
| 2.  | All other names you have   | ve   |   |  |
|     | Include your married or maiden names.  |  |   |  |
| 3.  | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-6329                                      |   |  |

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Case number (if known)

Debtor 1 Phillip David Brendle

|    |  | About Debtor 1:   | ı | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|---|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ☐ I have not used any business name or EINs.  ABP Painting  Business name(s)  EINs  | E | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live   | 519 Brown St.   | ı | f Debtor 2 lives at a different address:  |
|    |  | Wauconda, IL 60084  Number, Street, City, State & ZIP Code  | 1 | Number, Street, City, State & ZIP Code  |
|    |  | Lake  |   |   |
|    |  | County  | ( | County  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | i | f Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | 1 | Number, P.O. Box, Street, City, State & ZIP Code  |
| ò. | Why you are choosing this district to file for   | Check one:  |   | Check one:  |
|    | bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | ı | Over the last 180 days before filing this petition, I<br>have lived in this district longer than in any other<br>district.                |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ı | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)   |
|    |  |   |   |   |

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Case number (if known) Debtor 1 Phillip David Brendle

| •ar | t 2: Tell the Court About   | Your B      | Bankruptcy Ca  | ise   |  |   |       |
|-----|---|-------------|--|---|--|---|-------|
| 7.  | The chapter of the<br>Bankruptcy Code you are   |             |  |   | of each, see <i>Notice Required by</i> page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankrup<br>e box.   | otcy  |
|     | choosing to file under  | ■ Chapter 7 |  |   |  |   |       |
|     |   | □с          | hapter 11  |   |  |   |       |
|     |   | □с          | hapter 12  |   |  |   |       |
|     |   | □с          | hapter 13  |   |  |   |       |
|     |   |             |  |   |  |   |       |
| 3.  | How you will pay the fee  |             | about how yo   | u may pay. Typio<br>attorney is subm        | cally, if you are paying the fee yo                                    | k with the clerk's office in your local court for more ourself, you may pay with cash, cashier's check, or nalf, your attorney may pay with a credit card or check. | money |
|     |   |             |  |   | <b>Illments.</b> If you choose this option (Official Form 103A).       | on, sign and attach the Application for Individuals to  | Pay   |
|     |   |             |  |   |  | n only if you are filing for Chapter 7. By law, a judge   |       |
|     |   |             | but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out |   |  |   |       |
|     |   |             | the Application  | on to Have the Cl                           | hapter 7 Filing Fee Waived (Offic                                      | cial Form 103B) and file it with your petition.   |       |
|     |   |             |  |   |  |   |       |
| 9.  | Have you filed for bankruptcy within the  | ■ No        |  |   |  |   |       |
|     | last 8 years?   | □ Ye        |  |   | VA/II  | Occasional  |       |
|     |   |             | District   |   |  | Case number   |       |
|     |   |             | District   |   | When   | Case number   |       |
|     |   |             | District   |   | When   | Case number   |       |
| 10. | Are any bankruptcy  | ■ No        | 0  |   |  |   |       |
|     | cases pending or being filed by a spouse who is                                       | □ Ye        |  |   |  |   |       |
|     | not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? |             |  |   |  |   |       |
|     |   |             | Debtor   |   |  | Relationship to you   |       |
|     |   |             | District   |   | When   | Case number, if known   |       |
|     |   |             | Debtor   |   |  | Relationship to you   |       |
|     |   |             | District   |   | When   | Case number, if known   |       |
| 11  | Do you rent your  |             | n Go to li   | ino 12                                      |  |   |       |
| ٠   | residence?  | □ No        |  |   | nad an aviation judament agains  | t you and do you want to stay in your residence?  |       |
|     |   | ■ Ye        | es.  |   | , с с  | t you and do you want to stay in your residence?  |       |
|     |   |             |  | No. Go to line 1:                           | 2.   |   |       |
|     |   |             |  | Yes. Fill out <i>Inita</i> bankruptcy petit |  | Judgment Against You (Form 101A) and file it with t   | this  |

Debtor 1 Phillip David Brendle Document Page 4 of 43 Case number (if known)

| art | 3: Report About Any Bu  | sinesses `             | You Own   | as a Sole Proprieto                 | or  |  |
|-----|---|------------------------|---|-------------------------------------|---|--|
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.                  | Go to   | Part 4.                             |   |  |
|     |   | ☐ Yes.                 | Name  | and location of busi                | iness   |  |
|     | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                        | Name  | Name of business, if any            |   |  |
|     | If you have more than one sole proprietorship, use a separate sheet and attach  |                        | Numb  | er, Street, City, State             | e & ZIP Code  |  |
|     | it to this petition.  |                        | Check   |                                     | x to describe your business:  |  |
|     |   |                        |   |                                     | ness (as defined in 11 U.S.C. § 101(27A))   |  |
|     |   |                        |   | Single Asset Real                   | Estate (as defined in 11 U.S.C. § 101(51B))   |  |
|     |   |                        |   | Stockbroker (as de                  | efined in 11 U.S.C. § 101(53A))   |  |
|     |   |                        |   | Commodity Broker                    | r (as defined in 11 U.S.C. § 101(6))  |  |
|     |   |                        |   | None of the above                   |   |  |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadlines<br>operation | filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .C. 1116(1)(B). |                                     |   |  |
|     | For a definition of small   | ■ No.                  | I am n  | ot filing under Chapt               | ter 11.   |  |
|     | business debtor, see 11 U.S.C. § 101(51D).  | □ No.                  | I am fi<br>Code.  | •                                   | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |  |
|     |   | ☐ Yes.                 | I am fi   | ling under Chapter 1                | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |
| art | 4: Report if You Own or   | Have Any               | Hazardo   | us Property or Any                  | y Property That Needs Immediate Attention   |  |
| 14. | Do you own or have any  | ■ No.                  |   |                                     |   |  |
|     | property that poses or is<br>alleged to pose a threat<br>of imminent and  | ☐ Yes.                 | What is t   | he hazard?                          |   |  |
|     | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?  |                        |   | iate attention is why is it needed? |   |  |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |                        | Where is  | the property?                       | Number, Street, City, State & Zip Code  |  |
|     |   |                        |   |                                     |   |  |

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Debtor 1 Phillip David Brendle

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Dob  | tor 1 - Phillip Books Brown   |  | Documer Documer   |  |  |  |
|------|---|--|---|--|--|--|
|      | tor 1 Phillip David Bren  | iaie   |   |  | . (π κnown)  |  |
| Part | Answer These Quest  | ions for R   | leporting Purposes  |  |  |  |
| 16.  | What kind of debts do you have?   | 16a.   |   | nsumer debts? Consumer debts are definently, family, or household purpose."              | ned in 11 U.S.C. § 101(8) as "incurred by an   |  |
|      |   |  | ☐ No. Go to line 16b.   |  |  |  |
|      |   |  | Yes. Go to line 17.   |  |  |  |
|      |   | 16b.   |   | siness debts? Business debts are debts strengther through the operation of the business. |  |  |
|      |   |  | ☐ No. Go to line 16c.   |  |  |  |
|      |   |  | ☐ Yes. Go to line 17.   |  |  |  |
|      |   | 16c.   | State the type of debts you ov  | we that are not consumer debts or busines  | s debts  |  |
| 17.  | Are you filing under<br>Chapter 7?  | □ No.  | I am not filing under Chapter   | 7. Go to line 18.  |  |  |
|      | Do you estimate that after any exempt property is excluded and                          | ■ Yes.   |   | to you estimate that after any exempt propailable to distribute to unsecured creditors?  | erty is excluded and administrative expense  |  |
|      | administrative expenses   |  | ■ No  |  |  |  |
|      | are paid that funds will<br>be available for<br>distribution to unsecured<br>creditors? |  | Yes   |  |  |  |
| 18.  | How many Creditors do   | <b>1</b> -49   |   | □ 1,000-5,000  | □ 25,001-50,000  |  |
|      | you estimate that you owe?  | □ 50-99  |   | ☐ 5001-10,000  | ☐ 50,001-100,000   |  |
|      |   | ☐ 100-1<br>☐ 200-9                                   |   | ☐ 10,001-25,000  | ☐ More than100,000   |  |
| 19.  | How much do you   | <b>=</b> \$0 - \$                                    |   | ☐ \$1,000,001 - \$10 million   | ☐ \$500,000,001 - \$1 billion  |  |
|      | estimate your assets to be worth?   | <b>□</b> \$50,0                                      | 001 - \$100,000   | □ \$10,000,001 - \$50 million  | □ \$1,000,000,001 - \$10 billion   |  |
|      |   | □ \$100,001 - \$500,000<br>□ \$500,001 - \$1 million |   | ☐ \$50,000,001 - \$100 million<br>☐ \$100,000,001 - \$500 million                        | ☐ \$10,000,000,001 - \$50 billion<br>☐ More than \$50 billion                        |  |
|      |   | <b>□</b> \$500                                       | ,001 - \$1 million<br>  | — \$100,000,001 \$000 Hillion  | 2 More than 400 Simon  |  |
| 20.  | How much do you estimate your liabilities   | <b>\$0 - \$</b>                                      | \$50,000  | ☐ \$1,000,001 - \$10 million   | □ \$500,000,001 - \$1 billion  |  |
|      | to be?  |  | 001 - \$100,000   | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million                             | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion                   |  |
|      |   |  | ,001 - \$500,000<br>,001 - \$1 million  | □ \$100,000,001 - \$100 million  | ☐ More than \$50 billion   |  |
| Part | 7: Sign Below   |  |   |  |  |  |
| For  | you   | I have ex  | xamined this petition, and I decl   | lare under penalty of perjury that the inform  | nation provided is true and correct.   |  |
|      |   |  |   | I am aware that I may proceed, if eligible, elief available under each chapter, and I ch |  |  |
|      |   |  | o attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ument, I have obtained and read the notice required by 11 U.S.C. § 342(b). |  |  |  |
|      |   | I reques   | t relief in accordance with the cl  | hapter of title 11, United States Code, spec   | cified in this petition.   |  |
|      |   | bankrup<br>and 357                                   | tcy case can result in fines up to 1.   | concealing property, or obtaining money o<br>o \$250,000, or imprisonment for up to 20 y | r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519 |  |
|      |   | Phillip  | lip David Brendle David Brendle re of Debtor 1  | Signature of Debtor  | 2  |  |

Executed on

MM / DD / YYYY

Executed on **July 1, 2016** MM / DD / YYYY

Debtor 1 Phillip David Brendle Document Page 7 of 43 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Michael T. Barrett, Sr.            | Date          | July 1, 2016       |  |
|--|---------------|--------------------|--|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY     |  |
| Michael T Downest Co                   |               |                    |  |
| Michael T. Barrett, Sr.                |               |                    |  |
| Printed name                           |               |                    |  |
| James D. Huls & Associates             |               |                    |  |
| Firm name                              |               |                    |  |
| 530 Rockland Road                      |               |                    |  |
| Crystal Lake, IL 60014                 |               |                    |  |
| Number, Street, City, State & ZIP Code |               |                    |  |
| Contact phone <b>815-455-4755</b>      | Email address | michael@jdhuls.com |  |
| 6200869                                |               |                    |  |
| Bar number & State                     |               | <del></del>        |  |

|                        |                          | Docume            | ent Page 8 of 4 | 13 |                                      |
|------------------------|--------------------------|-------------------|-----------------|----|--------------------------------------|
| Fill in this infor     | mation to identify your  | case:             |                 |    |                                      |
| Debtor 1               | Phillip David Bre        | ndle              |                 |    |                                      |
|                        | First Name               | Middle Name       | Last Name       |    |                                      |
| Debtor 2               |                          |                   |                 |    |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name       |    |                                      |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS     |    |                                      |
| Case number (if known) |                          |                   |                 |    | ☐ Check if this is an amended filing |
|                        |                          |                   |                 |    |                                      |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets  |              |                         |
|-----|---|--------------|-------------------------|
|     |   | Your as      | ssets<br>f what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$           | 0.00                    |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$           | 7,265.00                |
|     | 1c. Copy line 63, Total of all property on Schedule A/B   | \$           | 7,265.00                |
| Par | 2: Summarize Your Liabilities   |              |                         |
|     |   |              | abilities<br>you owe    |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 0.00                    |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                          | \$           | 0.00                    |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$           | 19,013.00               |
|     | Your total liabilities  | \$           | 19,013.00               |
| Par | 3: Summarize Your Income and Expenses   | •            |                         |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$           | 1,239.46                |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$           | 1,290.00                |
| Par | 4: Answer These Questions for Administrative and Statistical Records  |              |                         |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                    | ur other sch | edules.                 |
| 7.  | ■ Yes What kind of debt do you have?  |              |                         |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for  | a nersonal   | family or               |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Phillip David Brendle

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

1,128.33 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

|          | Case 16-21524 Do  |                                  |                              | 16 14:05:46                             | Desc Main   |
|----------|---|----------------------------------|------------------------------|---|---|
| Fill in  | this information to identify your cas   | Document se and this filing:     | Page 10 of 43                |   |   |
| Debtor   |   | -                                |                              |   |   |
| Debioi   | Phillip David Brendle First Name  | Middle Name                      | Last Name                    |   |   |
| Debtor   |   |                                  |                              |   |   |
| (Spouse  | , if filing) First Name   | Middle Name                      | Last Name                    |   |   |
| United   | States Bankruptcy Court for the: NO   | ORTHERN DISTRICT OF ILLI         | NOIS                         |   |   |
| Casa r   | number  |                                  |                              |   | Observative de la cons                                      |
| <u> </u> |   |                                  | _<br>                        |   | ☐ Check if this is an<br>amended filing                     |
|          |   |                                  |                              |   |   |
| Offic    | cial Form 106A/B  |                                  |                              |   |   |
| Sch      | nedule A/B: Proper  | rtv                              |                              |   | 12/15   |
|          | category, separately list and describe ite  |                                  | an asset fits in more than o | no catogory list the ass                |   |
|          | tion. If more space is needed, attach a se every question.  Describe Each Residence, Building, La |                                  |                              | es, write your name and                 | case number (if known).                                     |
| Do w     | ou own or have any logal or equitable int   | aract in any racidonae, building | land or similar property?    |   |   |
| . Do y   | ou own or have any legal or equitable int   | erest in any residence, building | , land, or similar property? |   |   |
| ■ No     | o. Go to Part 2.  |                                  |                              |   |   |
| □ Ye     | es. Where is the property?  |                                  |                              |   |   |
| <b>5</b> |   |                                  |                              |   |   |
| Part 2:  | Describe Your Vehicles  |                                  |                              |   |   |
| Do you   | own, lease, or have legal or equital  | ble interest in any vehicles,    | whether they are registe     | red or not? Include a                   | ny vehicles you own that                                    |
| someor   | ne else drives. If you lease a vehicle, a   | ilso report it on Schedule G: E  | xecutory Contracts and U     | nexpired Leases.                        |   |
| 3. Cars  | s, vans, trucks, tractors, sport utility  | vehicles, motorcycles            |                              |   |   |
|          |   | •                                |                              |   |   |
| □ N      |   |                                  |                              |   |   |
| Y        | es  |                                  |                              |   |   |
|          |   |                                  |                              | Do not doduct socue                     | red claims or exemptions. Put                               |
| 3.1      | Make: Chevrolet   | Who has an interest in th        | e property? Check one        | the amount of any se                    | ecured claims on Schedule D:                                |
|          | Model: Astro Van  | Debtor 1 only                    |                              | Creditors Who Have                      | e Claims Secured by Property.                               |
|          | Year: 2000 Approximate mileage: 154000  | Debtor 2 only                    |                              | Current value of th                     |   |
|          | Approximate mileage: 154000 Other information:  | <u> </u>                         | •                            | entire property?                        | portion you own?  |
| Г        | Fair condition  | At least one of the debt         | ors and another              |   |   |
|          | Location: 519 Brown St.,  | ☐ Check if this is comm          | unity property               | \$2,300.0                               | 00 \$2,300.00   |
|          | Wauconda IL 60084   | (see instructions)               | unity property               |   | <u> </u>  |
|          |   |                                  |                              |   |   |
| 3.2      | Make: Honda   | Who has an interest in th        | e property? Check one        |   | red claims or exemptions. Put                               |
|          | Model: Accord   | Debtor 1 only                    |                              |   | ecured claims on Schedule D:<br>Claims Secured by Property. |
|          | Year: <b>2002</b>   | Debtor 2 only                    |                              |   | , , ,   |
|          | Approximate mileage: 224000   |                                  | only                         | Current value of th<br>entire property? | e Current value of the portion you own?                     |
|          | Other information:  | At least one of the debt         | •                            |   | p <b>y</b>  |
| Γ        | Fair condition  |                                  | 2.2 2.10 0.101.01            |   |   |
| 1        | Location: 519 Brown St.,  | ☐ Check if this is comm          | unity property               | \$800.0                                 | 9800.00   |
|          | Wauconda IL 60084   | (see instructions)               |                              |   | <u> </u>  |

Official Form 106A/B Schedule A/B: Property page 1

| Case 16-21524 Doc 1  Debtor 1 Phillip David Brendle   | Document Page 11 of 43  | L/16 14:05:46 Dealer (if known)                 | esc Main   |
|---|---|---|--|
| 3.3 Make: Skidoo  Model: Renegade   | Who has an interest in the property? Check one  Debtor 1 only                                       | Do not deduct secured the amount of any secured | claims or exemptions. Put<br>red claims on <i>Schedule D:</i><br>aims Secured by Property. |
| Year: 2005 Approximate mileage: Other information:  | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another              | Current value of the entire property?           | Current value of the portion you own?  |
| Fair condition<br>Location: 519 Brown St.,<br>Wauconda IL 60084   | ☐ Check if this is community property (see instructions)  | \$1,200.00                                      | \$1,200.00   |
| <ul> <li>4. Watercraft, aircraft, motor homes, ATVs and Examples: Boats, trailers, motors, personal wat</li> <li>■ No</li> <li>□ Yes</li> </ul>     | d other recreational vehicles, other vehicles, attercraft, fishing vessels, snowmobiles, motorcycle |   |  |
|   | n for all of your entries from Part 2, including a hat number here                                  |   | \$4,300.00   |
| Part 3: Describe Your Personal and Household Ite Do you own or have any legal or equitable into   |   |   | Current value of the portion you own? Do not deduct secured claims or exemptions.          |
|   | china, kitchenware  droom, and dining furniture rown St., Wauconda IL 60084                         |   | \$800.00   |
| including cell phones, cameras, m □ No ■ Yes. Describe  | eo, stereo, and digital equipment; computers, printe<br>edia players, games                         | ers, scanners; music collec                     | tions; electronic devices  |
| Television<br>Location: 519 Br  | rown St., Wauconda IL 60084   |   | \$100.00   |
| <ul> <li>8. Collectibles of value Examples: Antiques and figurines; paintings, p other collections, memorabilia, coll No □ Yes. Describe</li> </ul> | orints, or other artwork; books, pictures, or other a<br>lectibles                                  | rt objects; stamp, coin, or b                   | aseball card collections;  |
| musical instruments  No   | d other hobby equipment; bicycles, pool tables, go  | olf clubs, skis; canoes and k                   | sayaks; carpentry tools;   |
| <ul> <li>☐ Yes. Describe</li> <li>10. Firearms</li></ul>  | ion, and related equipment  |   |  |

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 **Phillip David Brendle** 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$150.00 All necessary used wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,050.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$15.00 Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... \$1,500.00 Chase Savings account Chase \$400.00 Checking 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership:

Case 16-21524

Doc 1

Filed 07/01/16

Entered 07/01/16 14:05:46

Desc Main

Entered 07/01/16 14:05:46 Case 16-21524 Doc 1 Filed 07/01/16 Desc Main Page 13 of 43

Case number (if known) Document Debtor 1 **Phillip David Brendle** 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security

benefits; unpaid loans you made to someone else

No

☐ Yes. Give specific information..

|                       | Case 10-21524  | Document Document   | Page 14 of 43  | Desc Main                  |  |  |  |
|-----------------------|--|---|--|----------------------------|--|--|--|
| Debtor 1              | Phillip David Brendle  | Document  | Case number (if known)                                 |                            |  |  |  |
|                       | ets in insurance policies<br>oles: Health, disability, or life in  | nsurance; health savings account (                                    | (HSA); credit, homeowner's, or renter's insura         | nce                        |  |  |  |
| ■ No                  |  |   |  |                            |  |  |  |
| ☐ Yes.                |  | of each policy and list its value.<br>ny name:                        | Beneficiary:   | Surrender or refund value: |  |  |  |
| If you a some of      |  | you from someone who has die<br>rust, expect proceeds from a life in  | ed<br>surance policy, or are currently entitled to rec | eive property because      |  |  |  |
|                       |  |   |  |                            |  |  |  |
| Examp<br>■ No<br>—    |  | er or not you have filed a lawsu isputes, insurance claims, or rights | it or made a demand for payment<br>s to sue            |                            |  |  |  |
| 34. Other             | 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims |   |  |                            |  |  |  |
| ■ No                  |  |   |  |                            |  |  |  |
| ☐ Yes.                | ☐ Yes. Describe each claim   |   |  |                            |  |  |  |
| 35. <b>Any fir</b> No | nancial assets you did not al  | ready list  |  |                            |  |  |  |
| ☐ Yes.                | Give specific information  |   |  |                            |  |  |  |
|                       | -  |   | ny entries for pages you have attached                 | \$1,915.00                 |  |  |  |
| Part 5: De            | scribe Any Business-Related Pr   | operty You Own or Have an Interest                                    | In. List any real estate in Part 1.                    |                            |  |  |  |
| 37 Do you 6           | own or have any legal or equital   | ole interest in any business-related p                                | ronerty?   |                            |  |  |  |
|                       | to Part 6.   | no interest in any baomices related p                                 | . opolity .  |                            |  |  |  |
| ☐ Yes. 0              | Go to line 38.   |   |  |                            |  |  |  |
|                       |  |   |  |                            |  |  |  |
|                       | scribe Any Farm- and Commerc<br>ou own or have an interest in farm   | ial Fishing-Related Property You Ow<br>land, list it in Part 1.       | n or Have an Interest In.                              |                            |  |  |  |
| 46. <b>Do you</b>     | ı own or have any legal or e   | quitable interest in any farm- or                                     | commercial fishing-related property?                   |                            |  |  |  |
| No.                   | Go to Part 7.  |   |  |                            |  |  |  |
| ☐ Yes                 | . Go to line 47.   |   |  |                            |  |  |  |
| Part 7:               | Describe All Property You Ow   | n or Have an Interest in That You Die                                 | d Not List Above                                       |                            |  |  |  |
|                       | have other property of any<br>oles: Season tickets, country c  | kind you did not already list?  |  |                            |  |  |  |
| ■ No                  | •  |   |  |                            |  |  |  |
| ☐ Yes.                | Give specific information  |   |  |                            |  |  |  |

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

\$0.00

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Case number (if known) Document Debtor 1 **Phillip David Brendle** 

| Part | 8: List the Totals of Each Part of this Form                 |            |                              |            |
|------|--|------------|------------------------------|------------|
| 55.  | Part 1: Total real estate, line 2                            |            |                              | \$0.00     |
| 56.  | Part 2: Total vehicles, line 5                               | \$4,300.00 |                              |            |
| 57.  | Part 3: Total personal and household items, line 15          | \$1,050.00 |                              |            |
| 58.  | Part 4: Total financial assets, line 36                      | \$1,915.00 |                              |            |
| 59.  | Part 5: Total business-related property, line 45             | \$0.00     |                              |            |
| 60.  | Part 6: Total farm- and fishing-related property, line 52    | \$0.00     |                              |            |
| 61.  | Part 7: Total other property not listed, line 54 +           | \$0.00     |                              |            |
| 62.  | Total personal property. Add lines 56 through 61             | \$7,265.00 | Copy personal property total | \$7,265.00 |
| 63.  | Total of all property on Schedule A/B. Add line 55 + line 62 |            |                              | \$7,265.00 |

Official Form 106A/B Schedule A/B: Property page 6

|                        |                          | I A A A A A A A A A A A A A A A A A A A | III I (1000 - 100 00 <del>4</del> 5) |                       |
|------------------------|--------------------------|---|--------------------------------------|-----------------------|
| Fill in this infor     | mation to identify your  | case:                                   |                                      |                       |
| Debtor 1               | Phillip David Bre        | ndle                                    |                                      |                       |
|                        | First Name               | Middle Name                             | Last Name                            |                       |
| Debtor 2               |                          |   |                                      |                       |
| (Spouse if, filing)    | First Name               | Middle Name                             | Last Name                            |                       |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT                       | OF ILLINOIS                          |                       |
| Case number (if known) |                          |   |                                      | ☐ Check if this is an |
|                        |                          |   |                                      | amended filing        |
|                        |                          |   |                                      | <br>_                 |

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Amount of the exemption you claim

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the

| Schedule A/B that lists this property   | portion you own                     |     |   |                       |
|---|-------------------------------------|-----|---|-----------------------|
|   | Copy the value from<br>Schedule A/B | Che | eck only one box for each exemption.                            |                       |
| 2000 Chevrolet Astro Van 154000 miles   | \$2,300.00                          |     | \$2,300.00  | 735 ILCS 5/12-1001(c) |
| Fair condition Location: 519 Brown St., Wauconda IL 60084 Line from Schedule A/B: 3.1 |                                     |     | 100% of fair market value, up to any applicable statutory limit |                       |
| 2002 Honda Accord 224000 miles  | \$800.00                            |     | \$800.00  | 735 ILCS 5/12-1001(b) |
| Location: 519 Brown St., Wauconda IL 60084 Line from <i>Schedule A/B</i> : 3.2        |                                     |     | 100% of fair market value, up to any applicable statutory limit |                       |
| 2005 Skidoo Renegade<br>Fair condition  | \$1,200.00                          |     | \$1,200.00  | 735 ILCS 5/12-1001(b) |
| Location: 519 Brown St., Wauconda IL 60084 Line from <i>Schedule A/B</i> : 3.3        |                                     |     | 100% of fair market value, up to any applicable statutory limit |                       |
| Living room, bedroom, and dining furniture  | \$800.00                            |     | \$800.00  | 735 ILCS 5/12-1001(b) |
| Location: 519 Brown St., Wauconda<br>IL 60084   |                                     |     | 100% of fair market value, up to any applicable statutory limit |                       |
| Line from Schedule A/B: 6.1   |                                     |     |   |                       |

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Case number (if known)

|    | David Brendle  |                                      |   | oase number (ii known)  |                                    |
|----|--|--------------------------------------|---|---|------------------------------------|
|    | Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | value from Check only one box for each exemption. |   | Specific laws that allow exemption |
|    |  | Copy the value from<br>Schedule A/B  |   |   |                                    |
|    | Television<br>Location: 519 Brown St., Wauconda  | \$100.00                             |   | \$100.00  | 735 ILCS 5/12-1001(b)              |
|    | IL 60084 Line from Schedule A/B: 7.1   |                                      |   | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | All necessary used wearing apparel Line from Schedule A/B: 11.1                        | \$150.00                             |   | \$150.00  | 735 ILCS 5/12-1001(a)              |
| L  | Line Holli Schedule AVB. 11.1  |                                      |   | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Cash Line from Schedule A/B: 16.1  | \$15.00                              |   | \$15.00   | 735 ILCS 5/12-1001(b)              |
| L  | Line Holli Schedule AVB. 10.1  |                                      |   | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Savings account: Chase Line from Schedule A/B: 17.1                                    | \$1,500.00                           |   | \$885.00  | 735 ILCS 5/12-1001(b)              |
|    | Line Holli Schedule AVB. 17.1  |                                      |   | 100% of fair market value, up to any applicable statutory limit |                                    |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every     |                                      |   | led on or after the date of adjustmer                           | nt.)                               |
|    | No   |                                      |   |   |                                    |
|    | ☐ Yes. Did you acquire the property cover  | ed by the exemption wi               | ithin 1   | ,215 days before you filed this case                            | ?                                  |
|    | □ No   |                                      |   |   |                                    |
|    | ☐ Yes  |                                      |   |   |                                    |

| Fill in this infor  | mation to identify your  | case:             |             |  |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1            | Phillip David Bre        |                   |             |  |
| Debtor 2            | First Name               | Middle Name       | Last Name   |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                          |                   |             |  |
| (if known)          |                          |                   |             |  |
|                     |                          |                   |             |  |

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

|                          | 3433 IS 2132 : B   | Document  | Page 19 of 43  | 40 Best Main                            |
|--------------------------|--|---|--|---|
| Fill in th               | is information to identify your o  |   |  |   |
| Debtor 1                 | Phillip David Bren   | dle   |  |   |
| 20210                    | First Name   | Middle Name   | Last Name  |   |
| Debtor 2                 |  |   |  |   |
| (Spouse if,              | filing) First Name   | Middle Name   | Last Name  |   |
| United S                 | tates Bankruptcy Court for the:  | NORTHERN DISTRICT OF IL   | LINOIS   |   |
| Case nui                 | mber   |   |  |   |
| (if known)               |  |   |  | ☐ Check if this is an                   |
|                          |  |   |  | amended filing                          |
| Officia                  | I Form 106E/F  |   |  |   |
|                          | lule E/F: Creditors W  | ho Have Unsecured   | l Claime   | 12/15                                   |
|                          |  |   | TY claims and Part 2 for creditors with NON  |   |
| Schedule<br>left. Attach | D: Creditors Who Have Claims Secu<br>n the Continuation Page to this pag-<br>case number (if known). | red by Property. If more space is e. If you have no information to re | Do not include any creditors with partially so needed, copy the Part you need, fill it out, report in a Part, do not file that Part. On the to               | number the entries in the boxes on the  |
| Part 1:                  | List All of Your PRIORITY Un   | secured Claims  |  |   |
| _                        | ny creditors have priority unsecured   | I claims against you?   |  |   |
|                          | o. Go to Part 2.   |   |  |   |
| □ Ye                     | 98.  |   |  |   |
| Part 2:                  | List All of Your NONPRIORIT  | Y Unsecured Claims  |  |   |
| 3. Do ar                 | ny creditors have nonpriority unsec  | ured claims against you?  |  |   |
|                          | o. You have nothing to report in this pa   | art. Submit this form to the court with                               | n your other schedules.  |   |
| ■ Ye                     | es.  |   |  |   |
| unsec                    | cured claim, list the creditor separately one creditor holds a particular claim, list                | for each claim. For each claim liste                                  | the creditor who holds each claim. If a creditor and, identify what type of claim it is. Do not list clath have more than three nonpriority unsecured claim. | ims already included in Part 1. If more |
|                          |  |   |  | Total claim                             |
|                          | AT&T   | Last 4 digits of acc  | count number   | \$500.00                                |
|                          | Nonpriority Creditor's Name  P.O. Box 8100   | When was the deb  | ot incurred? 2014-2015   |   |
|                          | Aurora, IL 60507   | When was the dep  | 2014-2015  |   |
|                          | Number Street City State Zlp Code  | As of the date you  | ifile, the claim is: Check all that apply  |   |
| V                        | Who incurred the debt? Check one.  |   |  |   |
| I                        | Debtor 1 only  | ☐ Contingent  |  |   |
| [                        | Debtor 2 only  | ☐ Unliquidated  |  |   |
| [                        | Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |   |
| [                        | $\Box$ At least one of the debtors and and   | ther Type of NONPRIO  | RITY unsecured claim:  |   |
| [                        | ☐ Check if this claim is for a comn  | nunity  |  |   |
|                          | lebt   |   | ing out of a separation agreement or divorce that  | at you did not                          |
| _                        | s the claim subject to offset?   | report as priority cla  |  | _                                       |
| _                        | No   | ·   | n or profit-sharing plans, and other similar debts   | 5                                       |
| [                        | Yes  | Other. Specify  | Internet   |   |

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Case number (if know)

| Debto | Phillip David Brendle  |  | Case number (if know)                         |             |
|-------|--|--|---|-------------|
| 4.2   | City of Rolling Meadows  | Last 4 digits of account number                              | 8491  | \$200.00    |
|       | Nonpriority Creditor's Name C/O Armor Systems Co. 2322 N. Green Bay Road                 | When was the debt incurred?                                  | 2016  |             |
|       | Waukegan, IL 60087  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                      |             |
|       | Debtor 1 only  | ☐ Contingent   |   |             |
|       | ☐ Debtor 2 only  | ☐ Unliquidated   |   |             |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |             |
|       | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                      |             |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |   |             |
|       | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |             |
|       | ■ No   | ☐ Debts to pension or profit-sharing                         | g plans, and other similar debts              |             |
|       | Yes  | Other. Specify Redlight vi                                   | olation                                       |             |
| 4.3   | Santander Consumer Nonpriority Creditor's Name   | Last 4 digits of account number                              | 1000  | \$17,438.00 |
|       | P.O. Box 961245<br>Fort Worth, TX 76161  | When was the debt incurred?                                  | 2014  |             |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.                      | As of the date you file, the claim                           | is: Check all that apply                      |             |
|       | Debtor 1 only  | ☐ Contingent   |   |             |
|       | Debtor 2 only  | ☐ Unliquidated   |   |             |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |             |
|       | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 |   |             |
|       | ☐ Check if this claim is for a community   | Student loans  |   |             |
|       | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |             |
|       | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |             |
|       | Yes  | Other. Specify Repossess                                     | ed authomobile                                |             |
| 4.4   | Village of Island Lake   | Last 4 digits of account number                              | 5387  | \$75.00     |
|       | Nonpriority Creditor's Name C/O TEK Collect 871 Park St.                                 | When was the debt incurred?                                  | 2014  |             |
|       | Columbus, OH 43215   |  |   |             |
|       | Number Street City State Zlp Code  | As of the date you file, the claim                           | is: Check all that apply                      |             |
|       | Who incurred the debt? Check one.  |  |   |             |
|       | Debtor 1 only  | Contingent   |   |             |
|       | Debtor 2 only  | Unliquidated   |   |             |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed   | L. Later                                      |             |
|       | At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 | a ciaim:                                      |             |
|       | Check if this claim is for a community debt  |  | aration agreement or divorce that you did not |             |
|       | Is the claim subject to offset?  | report as priority claims                                    |   |             |
|       | ■ No   | Debts to pension or profit-sharing                           |   |             |
|       | □ Yes  | ■ Other Specify Traffic viola                                | ation   |             |

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Case number (if know)

| Debtor | 1 Phillip David Brendle   | Case number (if know)  |          |  |  |
|--------|---|--|----------|--|--|
| 4.5    | Village of Lakemoor Nonpriority Creditor's Name   | Last 4 digits of account number 5644   | \$200.00 |  |  |
|        | C/O MCSI Inc.<br>P.O. Box 327   | When was the debt incurred? 2013   | _        |  |  |
|        | Palos Heights, IL 60463  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |          |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent   |          |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |          |  |  |
|        | Debtor 1 and Debtor 2 only  | ☐ Disputed   |          |  |  |
|        | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |          |  |  |
|        | ☐ Check if this claim is for a community  | ☐ Student loans  |          |  |  |
|        | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims                       | t        |  |  |
|        | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |          |  |  |
|        | Yes   | Other. Specify Traffic violation   | _        |  |  |
| 4.6    | Village of Lakemoor Nonpriority Creditor's Name   | Last 4 digits of account number 2783   | \$200.00 |  |  |
|        | C/O MCSI Inc.<br>P.O. Box 327<br>Palos Heights, IL 60463                                      | When was the debt incurred? 12/12  | _        |  |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.                           | As of the date you file, the claim is: Check all that apply  |          |  |  |
|        | Debtor 1 only   | ☐ Contingent   |          |  |  |
|        | Debtor 2 only   | ☐ Unliquidated   |          |  |  |
|        | Debtor 1 and Debtor 2 only  | ☐ Disputed   |          |  |  |
|        | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |          |  |  |
|        | Check if this claim is for a community  | ☐ Student loans  |          |  |  |
|        | debt Is the claim subject to offset?  | <ul> <li>Obligations arising out of a separation agreement or divorce that you did no<br/>report as priority claims</li> </ul> | t        |  |  |
|        | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |          |  |  |
|        | ☐ Yes   | ■ Other. Specify Traffic violation   |          |  |  |
| 4.7    | Village of Lakemoor   | Last 4 digits of account number 2783   | \$200.00 |  |  |
|        | Nonpriority Creditor's Name C/O MCSI Inc.   | When was the debt incurred? 2012   |          |  |  |
|        | P.O. Box 327  | <u> </u>   | _        |  |  |
|        | Palos Heights, IL 60463   | — As of the data you file the plain in O   |          |  |  |
|        | Number Street City State Zlp Code  Who incurred the debt? Check one.                          | As of the date you file, the claim is: Check all that apply  |          |  |  |
|        | Debtor 1 only   | ☐ Contingent   |          |  |  |
|        | Debtor 2 only   | ☐ Unliquidated   |          |  |  |
|        | Debtor 1 and Debtor 2 only  |  |          |  |  |
|        | ☐ At least one of the debtors and another   | •  |          |  |  |
|        | ☐ Check if this claim is for a community  | ☐ Student loans  |          |  |  |
|        | debt  | $\square$ Obligations arising out of a separation agreement or divorce that you did no   | t        |  |  |
|        | Is the claim subject to offset?   | report as priority claims  |          |  |  |
|        | No  | Debts to pension or profit-sharing plans, and other similar debts  |          |  |  |
|        | Yes   | ■ Other. Specify Traffic violation   |          |  |  |

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Case number (if know) Document Debtor 1 Phillip David Brendle

| Village of Lakemoor                      | Last 4 digits of account number 6956         | \$200.0                            |
|--|--|------------------------------------|
| Nonpriority Creditor's Name              |  |                                    |
| C/O MCSI Inc.                            | When was the debt incurred? 2012             |                                    |
| P.O. Box 327                             |  |                                    |
| Palos Heights, IL 60463                  | _  |                                    |
| Number Street City State Zlp Code        | As of the date you file, the claim is: Check | all that apply                     |
| Who incurred the debt? Check one.        |  |                                    |
| Debtor 1 only                            | ☐ Contingent                                 |                                    |
| Debtor 2 only                            | ☐ Unliquidated                               |                                    |
| Debtor 1 and Debtor 2 only               | ☐ Disputed                                   |                                    |
| At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:         |                                    |
| ☐ Check if this claim is for a community | ☐ Student loans                              |                                    |
| debt                                     | Obligations arising out of a separation ag   | eement or divorce that you did not |
| Is the claim subject to offset?          | report as priority claims                    | •                                  |
| No                                       | Debts to pension or profit-sharing plans,    | nd other similar debts             |
| ☐ Yes                                    | ■ Other. Specify Traffic violation           |                                    |

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |         |    | Total Claim |
|--------------|-----|---|---------|----|-------------|
|              | 6a. | Domestic support obligations  | 6a.     | \$ | 0.00        |
| Total claims |     |   |         |    |             |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b.     | \$ | 0.00        |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c.     | \$ | 0.00        |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d.     | \$ | 0.00        |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e.     | \$ | 0.00        |
|              | 6f. | Student loans   | 6f.     | \$ | Total Claim |
| Total claims | 0   |   | <b></b> | Ψ  | 0.00        |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.     | \$ | 0.00        |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.     | \$ | 0.00        |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i.     | \$ | 19,013.00   |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j.     | \$ | 19,013.00   |

|                     |                          | IAMAIIIN          | $\frac{1}{1}$ |  |
|---------------------|--------------------------|-------------------|---------------|--|
| Fill in this infor  | rmation to identify your | case:             |               |  |
| Debtor 1            | Phillip David Bre        | ndle              |               |  |
|                     | First Name               | Middle Name       | Last Name     |  |
| Debtor 2            |                          |                   |               |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name     |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS   |  |
| Case number         |                          |                   |               |  |
| (if known)          |                          |                   |               |  |
|                     |                          |                   |               |  |

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | whom you have the c | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---------------------|-------------------|---|
| 2.1 |           |              |                     |                   |   |
|     | Name      |              |                     |                   | _                                       |
|     | Number    | Street       |                     |                   | _                                       |
|     | City      |              | State               | ZIP Code          |   |
| 2.2 |           |              |                     |                   | _                                       |
|     | Name      |              |                     |                   |   |
|     | Number    | Street       |                     |                   | _                                       |
|     | City      |              | State               | ZIP Code          | <del>_</del>                            |
| 2.3 | Oity      |              | Olalo               | Zii Couc          |   |
|     | Name      |              |                     |                   |   |
|     | Number    | Street       |                     |                   | _                                       |
|     | Number    | Sileei       |                     |                   |   |
|     | City      |              | State               | ZIP Code          | _                                       |
| 2.4 |           |              |                     |                   |   |
|     | Name      |              |                     |                   |   |
|     |           |              |                     |                   |   |
|     | Number    | Street       |                     |                   |   |
|     |           |              |                     |                   |   |
|     | City      |              | State               | ZIP Code          | <del>_</del>                            |
| 2.5 |           |              |                     |                   |   |
|     | Name      |              |                     |                   | _                                       |
|     |           |              |                     |                   |   |
|     | Number    | Street       |                     |                   |   |
|     | City      |              | State               | ZIP Code          | <u> </u>                                |
|     |           |              |                     |                   |   |

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|   |   | DUGUITE   | III Paue 74 0   | 1 45   |   |
|---|---|---|---|--|---|
| Fill in this inf  | ormation to identify your   |   |   |  |   |
| Debtor 1  | Phillip David Bre   | ndle  |   |  |   |
|   | First Name  | Middle Name   | Last Name   |  |   |
| Debtor 2<br>(Spouse if, filing)                                       | First Name  | Middle Name   | Last Name   |  |   |
| United States   | Bankruptcy Court for the:   | NORTHERN DISTRICT   | OF ILLINOIS   |  |   |
| 0   |   |   |   |  |   |
| Case number<br>(if known)   |   |   |   |  | ☐ Check if this is an amended filing  |
|   | Form 106H   | obtono  |   | <u>.</u>   |   |
| Scneau  | le H: Your Cod  | eptors  |   |  | 12/15   |
| No Yes  2. Within Arizona, C  No. Go  Yes. D  3. In Columnin line 2 a | id your spouse, former spound in 1, list all of your codebtagain as a codebtor only i | I lived in a community pr<br>Nevada, New Mexico, Pu<br>use, or legal equivalent live<br>ors. Do not include your<br>f that person is a guaran | operty state or territor<br>erto Rico, Texas, Washi<br>with you at the time?<br>spouse as a codebtor<br>tor or cosigner. Make s | y? (Community property songton, and Wisconsin.)  if your spouse is filing was the control of the | tates and territories include<br>vith you. List the person shown<br>creditor on Schedule D (Official<br>hedule E/F, or Schedule G to fill |
| out Colu  |   | ,   | •   | ,  | •   |
|   | umn 1: Your codebtor<br>e, Number, Street, City, State and Z                          | P Code  |   | Column 2: The credit<br>Check all schedules t  | tor to whom you owe the debt  |
| Nam   |   |   |   | _ ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line   |   |
| City  |   | State   | ZIP Code  |  |   |
| 3.2 Nam   | ne  |   |   | _ ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line   |   |
| Num   | nber Street   |   |   | _  |   |
| City  |   | State   | ZIP Code  |  |   |

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|                    | in this information to identify your obtor 1 Phillip Davi   |                             |                                       |               |             |      |              |             |                |                      |  |
|--------------------|---|-----------------------------|---------------------------------------|---------------|-------------|------|--------------|-------------|----------------|----------------------|--|
|                    | btor 2  |                             |                                       |               |             | _    |              |             |                |                      |  |
| Uni                | ited States Bankruptcy Court for the  | e: NORTHERN DISTRIC         | CT OF ILL                             | LINOIS        |             |      |              |             |                |                      |  |
|                    | se number<br>nown)  |                             | -                                     |               |             |      | ☐ An         |             |                |                      |  |
|                    | fficial Form 106I   |                             |                                       |               |             |      | MN           | M / DD/ Y   | YYY            |                      |  |
| S                  | chedule I: Your Inc   | ome                         |                                       |               |             |      |              |             |                |                      | 12/15  |
| spo<br>atta<br>Par | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment Fill in your employment | ur spouse is not filing wi  | ith you, c                            | do not inclu  | de infor    | mati | on about     | your spo    | ouse. If moi   | re space is          | needed,                                      |
| 1.                 | information.  |                             | Debtor 1                              |               |             |      | Debtor 2     | or non-fili | ng spouse      | )                    |  |
|                    | If you have more than one job, attach a separate page with  | Employment status           | ■ Employed                            |               |             |      | ☐ Emplo      | -           |                |                      |  |
|                    | information about additional employers.   |                             | □ Not employed  Painter               |               |             |      |              | ☐ Not e     | mployed        |                      |  |
|                    | • •   | Occupation                  |                                       |               |             |      |              |             |                |                      |  |
|                    | Include part-time, seasonal, or self-employed work.   | Employer's name             | PIP P                                 | ainting       |             |      |              |             |                |                      |  |
|                    | Occupation may include student or homemaker, if it applies.   | Employer's address          | 518 N. Brockway<br>Palatine, IL 60067 |               |             |      |              |             |                |                      |  |
|                    |   | How long employed to        | here?                                 | 4 week        | s           |      |              | _           |                |                      |  |
| Pai                | rt 2: Give Details About Mo   | nthly Income                |                                       |               |             |      |              |             |                |                      |  |
|                    | mate monthly income as of the cuse unless you are separated.  | late you file this form. If | you have                              | nothing to re | eport for   | any  | line, write  | \$0 in the  | space. Incl    | ude your no          | on-filing                                    |
|                    | ou or your non-filing spouse have me space, attach a separate sheet to  |                             | mbine th                              | e informatio  | n for all e | empl | oyers for th | nat perso   | on on the line | es below. It         | f you need                                   |
|                    |   |                             |                                       |               |             |      | For Debt     | tor 1       | For Deb        | tor 2 or<br>g spouse |  |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,  |                             |                                       |               | 2.          | \$   | 1,4          | 162.50      | \$             | N/A                  | <u>.                                    </u> |
| 3.                 | Estimate and list monthly over  | time pay.                   |                                       |               | 3.          | +\$  |              | 0.00        | +\$            | N/A                  | <u>.                                    </u> |

1,462.50

N/A

Calculate gross Income. Add line 2 + line 3.

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| Deb | tor 1         | Phillip David Brendle   |      | (                    | Case        | number (if kno | wn)        |        |                |            |                    |
|-----|---------------|---|------|----------------------|-------------|----------------|------------|--------|----------------|------------|--------------------|
|     |               |   |      |                      | For         | r Debtor 1     |            | For I  | Debtor         | 2 or       |                    |
|     |               |   |      |                      | 1 01        | Debtor 1       |            |        |                | pouse      |                    |
|     | Cop           | y line 4 here   | 4.   |                      | \$          | 1,462.         | 50         | \$     |                | N/A        | <u>\</u>           |
| 5.  | List          | all payroll deductions:   |      |                      |             |                |            |        |                |            |                    |
|     | 5a.           | Tax, Medicare, and Social Security deductions   | 5a   | ١.                   | \$          | 223.           | 04         | \$     |                | N/A        |                    |
|     | 5b.           | Mandatory contributions for retirement plans  | 5b   | ١.                   | \$          |                | 00         | \$     |                | N/A        |                    |
|     | 5c.           | Voluntary contributions for retirement plans  | 5c   |                      | \$          | 0.             | 00         | \$     |                | N/A        | <u></u>            |
|     | 5d.           | Required repayments of retirement fund loans  | 5d   | l.                   | \$_         | 0.             | 00         | \$     |                | N/A        | <u>\</u>           |
|     | 5e.           | Insurance   | 5e   |                      | \$          | 0.             | 00         | \$     |                | N/A        | _                  |
|     | 5f.           | Domestic support obligations  | 5f.  |                      | \$_         |                | 00         | \$     |                | N/A        |                    |
|     | 5g.           | Union dues  | 5g   |                      | \$_         |                | 00         | \$     |                | N/A        | _                  |
|     | 5h.           | Other deductions. Specify:  | 5h   | 1.+                  | \$_         | 0.             | 00         | + \$   |                | N/A        | <u>\</u>           |
| 6.  | Add           | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.   |                      | \$_         | 223.           | 04         | \$     |                | N/A        | <u>\</u>           |
| 7.  | Cald          | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.   |                      | \$_         | 1,239.         | 46         | \$     |                | N/A        | <u>\</u>           |
| 8.  | List<br>8a.   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a   |                      | \$          | 0              | 00         | \$     |                | <b>N1/</b> |                    |
|     | 8b.           | Interest and dividends  | 8b   |                      | <b>\$</b> - |                | 00         | \$<br> |                | N/A<br>N/A |                    |
|     | 8c.           | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  |      |                      | \$_<br>\$   |                |            | \$     |                |            | _                  |
|     | 8d.           | Unemployment compensation   | 8d   |                      | <b>\$</b> - |                | 00<br>00   | \$<br> |                | N/A        | _                  |
|     | 8e.           | Social Security   | 8e   |                      | \$<br>-     |                | 00         | \$     |                | N/A        |                    |
|     | 8f.           | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:          | 8f.  |                      | \$_         | 0.             | 00         | \$     |                | N/A        | <u> </u>           |
|     | 8g.           | Pension or retirement income  | 8g   |                      | \$<br>\$    |                | 00         | —      |                | N/A        |                    |
|     | 8h.           | Other monthly income. Specify:  | 8h   | ı. <del>+</del><br>— | Φ_          | U.             | 00         | + »    |                | N/A        | <u>\</u>           |
| 9.  | Add           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.   | 5                    | \$          | 0.             | 00         | \$     |                | N/         | Ά.                 |
| 10. | Cald          | culate monthly income. Add line 7 + line 9.   | 10.  | \$                   |             | 1,239.46       | <b>.</b> s |        | N/A            | = \$       | 1,239.46           |
|     |               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |      | _                    |             | 1,200.40       |            |        | 14//           |            | 1,200.40           |
| 11. | Inclu<br>othe | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your r friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify:         | depe |                      |             | . •            |            |        | chedule<br>11. |            | 0.00               |
| 12. |               | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies   |      |                      |             |                |            |        | 12.            | \$         | 1,239.46           |
| 13  | Do            | ou expect an increase or decrease within the year after you file this form  | ?    |                      |             |                |            |        | '              | Comb       | ined<br>Ily income |
| ١٥. | <b>₽</b>      | No.   | •    |                      |             |                |            |        |                |            |                    |
|     | _             | Yes Explain:  |      |                      |             |                |            |        |                |            |                    |

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| Fill_i | in this information to identify your case:  |                          |                 |  |   |
|--------|---|--------------------------|-----------------|--|---|
| Debt   |   |                          | Chec            | k if this is:                          |   |
|        | - minp Baria Brenaio  |                          |                 | An amended filing                      |   |
|        | tor 2buse, if filing)   |                          |                 | A supplement show<br>13 expenses as of | wing postpetition chapter the following date: |
| ` '    |   | INOIO                    | _               |  |   |
| Unite  | ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL  | LINOIS                   |                 | MM / DD / YYYY                         |   |
|        | e number<br>nown)   |                          |                 |  |   |
| Of     | fficial Form 106J   |                          |                 |  |   |
|        | chedule J: Your Expenses  |                          |                 |  | 12/1  |
| info   | as complete and accurate as possible. If two married people<br>ormation. If more space is needed, attach another sheet to th<br>nber (if known). Answer every question. |                          |                 |  |   |
| Part   |   |                          |                 |  |   |
| 1.     | Is this a joint case?   |                          |                 |  |   |
|        | ■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?   |                          |                 |  |   |
|        |   |                          |                 |  |   |
|        | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expens  | ses for Separate House   | ehold of Deb    | or 2.                                  |   |
| 2.     | Do you have dependents? ☐ No  |                          |                 |  |   |
|        | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent   | •                        |                 | Dependent's age                        | Does dependent live with you?                 |
|        | Do not state the  |                          |                 |  | □ No  |
|        | dependents names.   | Son                      |                 | 13 years                               | Yes   |
|        |   |                          |                 |  | □ No<br>□ Yes                                 |
|        |   | -                        |                 |  | □ res   |
|        |   |                          |                 |  | ☐ Yes   |
|        |   |                          |                 |  | □ No  |
|        |   |                          |                 |  | ☐ Yes   |
| 3.     | Do your expenses include expenses of people other than  |                          |                 |  |   |
|        | yourself and your dependents?   |                          |                 |  |   |
| Part   | t 2: Estimate Your Ongoing Monthly Expenses   |                          |                 |  |   |
| exp    | imate your expenses as of your bankruptcy filing date unles<br>penses as of a date after the bankruptcy is filed. If this is a su<br>plicable date.                     |                          |                 |  |   |
| the    | lude expenses paid for with non-cash government assistanc<br>value of such assistance and have included it on <i>Schedule</i><br>ficial Form 106l.)                     |                          |                 | Your exp                               | enses   |
| (•     | ,   |                          |                 |  |   |
| 4.     | The rental or home ownership expenses for your residence payments and any rent for the ground or lot.   | e. Include first mortgag | e<br>4. \$      |  | 500.00  |
|        | If not included in line 4:  |                          |                 |  |   |
|        | 4a. Real estate taxes   |                          | 4a. \$          |  | 0.00  |
|        | 4b. Property, homeowner's, or renter's insurance  |                          | 4b. \$          |  | 0.00  |
|        | 4c. Home maintenance, repair, and upkeep expenses   |                          | 4c. \$          |  | 0.00  |
| 5.     | <ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as</li> </ul>                                   | home equity loans        | 4d. \$<br>5. \$ |  | 0.00<br>0.00                                  |

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| Deb | otor 1  | Phillip D    | avid Brendle   | Case nur                      | mber (if known) |                                 |
|-----|---------|--------------|--|-------------------------------|-----------------|---------------------------------|
| 6.  | Utiliti | ies:         |  |                               |                 |                                 |
| ٥.  | 6a.     |              | , heat, natural gas  | 6a                            | . \$            | 0.00                            |
|     | 6b.     |              | wer, garbage collection  | 6b                            | . \$            | 0.00                            |
|     | 6c.     |              | e, cell phone, Internet, satellite, and cable services   | 6c                            | . \$            | 125.00                          |
|     | 6d.     | Other. Sp    | ecify:   | 6d                            | . \$            | 0.00                            |
| 7.  | Food    |              | ekeeping supplies  | 7                             |                 | 200.00                          |
| 8.  |         |              | children's education costs   | 8                             | . \$            | 50.00                           |
| 9.  | Cloth   | hing, laund  | ry, and dry cleaning   | 9                             | . \$            | 10.00                           |
| 10. | Perso   | onal care p  | products and services  | 10                            | . \$            | 25.00                           |
|     |         | -            | ntal expenses  | 11                            | . \$            | 100.00                          |
|     |         |              | Include gas, maintenance, bus or train fare.   |                               |                 |                                 |
|     |         |              | ar payments.   | 12                            | . \$            | 100.00                          |
| 13. | Ente    | rtainment,   | clubs, recreation, newspapers, magazines, and books  | 13                            | . \$            | 0.00                            |
| 14. | Char    | itable cont  | ributions and religious donations  | 14                            | . \$            | 0.00                            |
| 15. | Insur   | rance.       |  |                               |                 |                                 |
|     |         |              | nsurance deducted from your pay or included in lines 4 or 20.  |                               |                 |                                 |
|     | 15a.    | Life insura  | ance   | 15a                           |                 | 0.00                            |
|     | 15b.    | Health ins   | urance   | 15b                           | . \$            | 180.00                          |
|     | 15c.    | Vehicle in   | surance  | 15c                           | . \$            | 0.00                            |
|     | 15d.    | Other insu   | ırance. Specify:   | 15d                           | . \$            | 0.00                            |
| 16. |         |              | nclude taxes deducted from your pay or included in lines 4 or 20   | ).                            | -               |                                 |
|     | Spec    | ,            |  | 16                            | . \$            | 0.00                            |
| 17. |         |              | ease payments:   |                               |                 |                                 |
|     |         |              | ents for Vehicle 1   | 17a                           |                 | 0.00                            |
|     |         |              | ents for Vehicle 2   | 17b                           |                 | 0.00                            |
|     |         | Other. Spe   |  | 17c                           | . \$            | 0.00                            |
|     |         | Other. Spe   |  | 17d                           | . \$            | 0.00                            |
| 18. |         |              | of alimony, maintenance, and support that you did not rep  |                               | ¢.              | 0.00                            |
| 40  |         |              | your pay on line 5, Schedule I, Your Income (Official Form   | 106I). <sup>10</sup>          | . \$            |                                 |
| 19. |         |              | s you make to support others who do not live with you.   | 4.0                           | \$              | 0.00                            |
| 00  | Spec    |              | anti- anni anni anni di anti- di addini di anni anni Bratilita Camarana  | 19                            |                 |                                 |
| 20. |         |              | erty expenses not included in lines 4 or 5 of this form or on<br>s on other property   | <b>1 Scneaule I: Y</b><br>20a |                 | 0.00                            |
|     |         | Real estat   |  | 20a<br>20b                    |                 | 0.00                            |
|     |         |              |  |                               |                 | 0.00                            |
|     |         |              | homeowner's, or renter's insurance   | 20c                           |                 | 0.00                            |
|     |         |              | nce, repair, and upkeep expenses   | 20d                           |                 | 0.00                            |
|     |         |              | er's association or condominium dues   | 20e                           | · -             | 0.00                            |
| 21. | Othe    | r: Specify:  |  | 21                            | +\$             | 0.00                            |
| 22. | Calcı   | ulate vour   | monthly expenses   |                               |                 |                                 |
|     |         |              | through 21.  |                               | \$              | 1,290.00                        |
|     |         |              | 2 (monthly expenses for Debtor 2), if any, from Official Form 10   | 6J-2                          | \$              | 1,200.00                        |
|     |         |              | a and 22b. The result is your monthly expenses.  |                               | \$              | 4 200 00                        |
|     | 220. /  | Add IIIIe ZZ | a and 22b. The result is your monthly expenses.  |                               | Ψ               | 1,290.00                        |
| 23. | Calc    | ulate your   | monthly net income.  |                               |                 |                                 |
|     | 23a.    | Copy line    | 12 (your combined monthly income) from Schedule I.   | 23a                           | . \$            | 1,239.46                        |
|     | 23b.    | Copy your    | r monthly expenses from line 22c above.  | 23b                           | \$              | 1,290.00                        |
|     |         |              |  |                               |                 | <u> </u>                        |
|     | 23c.    |              | our monthly expenses from your monthly income.   |                               |                 | E0 E4                           |
|     |         | The result   | is your monthly net income.  | 23c                           | .   \$          | -50.54                          |
| ٠.  | _       |              |  | ,                             |                 |                                 |
| 24. |         |              | an increase or decrease in your expenses within the year at<br>ou expect to finish paying for your car loan within the year or do you expe |                               |                 | nano or dogrando bassilias of a |
|     |         |              | ou expect to finish paying for your car loan within the year or do you expe<br>terms of your mortgage?                                     | ect your mongage              | payment to incr | case of decrease Decause of a   |
|     | ■ No    |              | , - 2  |                               |                 |                                 |
|     |         |              | Explain here:  |                               |                 |                                 |
|     | 1 1 7 6 |              | I LADIGITI HELE.   |                               |                 |                                 |

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| Fill in this inform             | mation to identify your                                       | case:                     |                          |                           |  |
|---------------------------------|---|---------------------------|--------------------------|---------------------------|--|
| Debtor 1                        | Phillip David Bre   | ndle                      |                          |                           |  |
|                                 | First Name  | Middle Name               | Last Name                |                           |  |
| Debtor 2<br>(Spouse if, filing) | First Name  | Middle Name               | Last Name                |                           |  |
| United States Ba                | nkruptcy Court for the:                                       | NORTHERN DISTRICT         | OF ILLINOIS              |                           |  |
| Case number _ (if known)        |   |                           |                          |                           | ☐ Check if this is an amended filing   |
| Official Forn                   | n 106Dec  |                           |                          |                           |  |
| Declarat                        | ion About a   | an Individual             | <b>Debtor's S</b>        | chedules                  | 12/15  |
| years, or both. 1               | y or property by fraud i<br>8 U.S.C. §§ 152, 1341,<br>n Below |                           | ruptcy case can resul    | t in fines up to \$250,00 | 00, or imprisonment for up to 20   |
| Did you pa                      | y or agree to pay some  | eone who is NOT an attorn | ney to help you fill out | bankruptcy forms?         |  |
| ■ No                            |   |                           |                          |                           |  |
| ☐ Yes. N                        | Name of person  |                           |                          |                           | akruptcy Petition Preparer's Notice,<br>n, and Signature (Official Form 119) |
|                                 | Ity of perjury, I declare<br>e true and correct.              | that I have read the sumr | nary and schedules fi    | led with this declarati   | on and   |
| X /s/ Phil                      | lip David Brendle   |                           | x                        |                           |  |
| Phillip                         | David Brendle<br>re of Debtor 1                               |                           | Signature of             | of Debtor 2               |  |

Date \_\_\_\_\_

Date **July 1, 2016** 

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| Fill    | in this inform                                    | ation to identify you                       | r case:  |   |  |   |
|---------|---|---|--|---|--|---|
| Deb     | tor 1   | Phillip David Bro                           |  |   |  |   |
| Deh     | tor 2   | First Name                                  | Middle Name  | Last Name   |  |   |
|         | use if, filing)                                   | First Name                                  | Middle Name  | Last Name   |  |   |
| Unit    | ed States Bar                                     | kruptcy Court for the:                      | NORTHERN DISTRICT O  | OF ILLINOIS   |  |   |
| Cas     | e number  |   |  |   |  |   |
| (if kno |   |   |  |   | _  | Check if this is an<br>mended filing                  |
|         | icial For   |   | Affairs for Individ  | duals Filing for B                                    | sankruptcy   | 4/10  |
| infor   | mation. If me<br>ber (if known                    | ore space is needed,<br>). Answer every que | attach a separate sheet to   | this form. On the top of an                           | equally responsible for sup<br>y additional pages, write you   |   |
| 1.      | What is your                                      | current marital statu                       | ıs?  |   |  |   |
|         | <ul><li>☐ Married</li><li>■ Not married</li></ul> | ried  |  |   |  |   |
| 2.      | During the la                                     | ıst 3 years, have you                       | lived anywhere other than  | where you live now?                                   |  |   |
|         | □ No  |   |  |   |  |   |
|         |   | all of the places you l                     | ived in the last 3 years. Do no  | ot include where you live nov                         | ٧.   |   |
|         | Debtor 1 Pri                                      | or Address:                                 | Dates Debtor 1 lived there   | Debtor 2 Prior Ac                                     | Idress:  | Dates Debtor 2<br>lived there                         |
|         | 331 Brown<br>Wauconda                             |   | From-To:<br><b>2013 - 2014</b>   | ☐ Same as Debtor                                      | 1  | ☐ Same as Debtor 1 From-To:                           |
|         | ■ No □ Yes. Mal                                   | es include Árizona, Ca                      | lifornia, Idaho, Louisiana, Ne<br>hedule H: Your Codebtors (Of                               | vada, New Mexico, Puerto R                            | ity property state or territor<br>ico, Texas, Washington and V |   |
|         | Fill in the total                                 | I amount of income yo                       | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | all businesses, including part                        |  | ndar years?   |
|         | □ No  |   |  |   |  |   |
|         | Yes. Fill   | in the details.                             |  |   |  |   |
|         |   |   | Debtor 1   |   | Debtor 2   |   |
|         |   |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions<br>and exclusions) |
|         |   | of current year until<br>d for bankruptcy:  | ■ Wages, commissions, bonuses, tips  | \$6,770.50  | ☐ Wages, commissions, bonuses, tips                            |   |
|         |   |   | ☐ Operating a business   |   | ☐ Operating a business   |   |

Official Form 107

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Case number (if known) Document Debtor 1 Phillip David Brendle

|            |  |  | Debtor 1   |  | Debtor 2   |                                    |   |
|------------|--|--|--|--|--|------------------------------------|---|
|            |  |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)  | Sources of inco  |                                    | Gross income<br>(before deductions<br>and exclusions) |
|            | r last calendar ye<br>anuary 1 to Decen  |  | ■ Wages, commissions, bonuses, tips  | \$15,438.00  | ☐ Wages, common bonuses, tips  | nissions,                          |   |
|            |  |  | ☐ Operating a business   |  | Operating a b  | usiness                            |   |
|            | r the calendar yea<br>anuary 1 to Decen  |  | ■ Wages, commissions, bonuses, tips  | \$11,791.00  | ☐ Wages, common bonuses, tips  | nissions,                          |   |
|            |  |  | ☐ Operating a business   |  | ☐ Operating a b  | usiness                            |   |
|            | winnings. If you a   | are filing a joint ca  | ; pensions; rental income; intere<br>ise and you have income that y<br>come from each source separate  | ou received together, list it  | only once under Del  | otor 1.                            | i gambiing and lottery                                |
|            |  |  | Debtor 1   |  | Debtor 2   |                                    |   |
|            |  |  | Sources of income Describe below.  | Gross income from each source (before deductions and exclusions)   | Sources of inco  | me                                 | Gross income<br>(before deductions<br>and exclusions) |
| Pa         | rt 3: List Certa   | in Payments You  | u Made Before You Filed for E  | Bankruptcy   |  |                                    |   |
| <b>3</b> . | □ No. <b>Neith</b> individed in the individed in the individed in the individual individual in the individual individ | er Debtor 1 nor dual primarily for g the 90 days bef lo. Go to line 'es List below paid that c not include | 2's debts primarily consumer Debtor 2 has primarily consular a personal, family, or household for you filed for bankruptcy, did 7.  each creditor to whom you paid reditor. Do not include payment a payments to an attorney for the ton 4/01/19 and every 3 years | mer debts. Consumer debtd purpose."  d you pay any creditor a total of \$6,425* or more ts for domestic support oblinis bankruptcy case. | al of \$6,425* or more<br>in one or more payr<br>gations, such as chil | e?<br>nents and th<br>d support ar | ne total amount you<br>nd alimony. Also, do           |
|            | Yes. Debte   | or 1 or Debtor 2   | or both have primarily consulting one you filed for bankruptcy, did  | mer debts.   |  |                                    |   |
|            |  |  | 7.   |  |  |                                    |   |
|            |  | include pa   | each creditor to whom you paid<br>yments for domestic support ob<br>or this bankruptcy case.   |  |  |                                    |   |
|            | Creditor's Nam   | e and Address  | Dates of paymen  | nt Total amount  | Amount you still owe   | Was this p                         | ayment for  |

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Case number (if known) Document Debtor 1 Phillip David Brendle

| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |                             |                         |                       |                         |                              |  |
|-----|---|-----------------------------|-------------------------|-----------------------|-------------------------|------------------------------|--|
|     | ■ No  |                             |                         |                       |                         |                              |  |
|     | ☐ Yes. List all payments to an insider.   |                             |                         |                       |                         |                              |  |
|     | Insider's Name and Address  | Dates of payment            | Total amount paid       | Amount you still owe  | Reason for              | this payment                 |  |
| 8.  | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.   |                             |                         |                       |                         |                              |  |
|     | ■ No  |                             |                         |                       |                         |                              |  |
|     | ☐ Yes. List all payments to an insider  |                             |                         |                       |                         |                              |  |
|     | Insider's Name and Address  | Dates of payment            | Total amount paid       | Amount you still owe  | Reason for Include cred | this payment<br>litor's name |  |
| Pal | t 4: Identify Legal Actions, Repossession   | ns and Foreclosures         |                         |                       |                         |                              |  |
| 9.  | Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.  ■ No □ Yes. Fill in the details.   | cases, small claims action  | s, divorces, collection | on suits, paternity a | ctions, suppor          | t or custody                 |  |
|     | Case title Case number  | Nature of the case          | Court or agency         |                       | Status of th            | ne case                      |  |
| 10. | Within 1 year before you filed for bankrupt. Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  | N. T. T. T.                 | erty repossessed, f     |                       | shed, attached          |                              |  |
|     | Creditor Name and Address   | Describe the Property       |                         | Date                  |                         | Value of the<br>property     |  |
|     |   | Explain what happened       | d                       |                       |                         |                              |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment become No  Yes. Fill in the details.   |                             | luding a bank or fi     | nancial institution   | , set off any a         | amounts from your            |  |
|     | Creditor Name and Address   | Describe the action the     | creditor took           |                       | action was              | Amount                       |  |
| 12. | <ul> <li>Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?</li> <li>No</li> <li>Yes</li> </ul>   |                             |                         |                       |                         |                              |  |
| Pai | t 5: List Certain Gifts and Contributions   |                             |                         |                       |                         |                              |  |
| 13. | Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.  | otcy, did you give any gift | s with a total value    | of more than \$60     | 0 per person            | ?                            |  |
|     | Gifts with a total value of more than \$600 per person  | Describe the gifts          |                         | Dates<br>the g        | s you gave<br>ifts      | Value                        |  |
|     | Person to Whom You Gave the Gift and Address:   |                             |                         |                       |                         |                              |  |

Case 16-21524 Doc 1 Filed 07/01/16 Entered 07/01/16 14:05:46 Page 33 of 43 Case number (if known) Document Debtor 1 **Phillip David Brendle** 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property Person Who Was Paid Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You

\$1,309.00 Michael T. Barrett, Sr. 5/14/2016 Attorney fees - \$949.00 530 Rockland Road Credit report - 25.00 Crystal Lake, IL 60014 Ct. filing fee 335.00 Total collected: \$1309.00 **Abacus Credit Counseling** Credit counseling courese 6/22/2016 \$25.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

Nο Yes. Fill in the details. Person Who Was Paid Address

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Case number (if known) Document

Debtor 1 **Phillip David Brendle** 

| 19. |  | thin 10 years before you filed for bankrup<br>neficiary? (These are often called asset-pro<br>No                                |  | ny property to a                                  | self-settle             | d trust or similar device                            | of which               | you are a                               |
|-----|--|---|--|---|-------------------------|--|------------------------|---|
|     |  | Yes. Fill in the details.   |  |   |                         |  |                        |   |
|     | Name of trust  |   | Description and  | Description and value of the property transferred |                         | sferred  | Date Transfer was made |   |
| Pa  | t 8:   | List of Certain Financial Accounts, Ins   | struments, Safe Depos  | it Boxes, and S                                   | torage Unit             | ts   |                        |   |
| 20. |  | hin 1 year before you filed for bankruptcy  | y, were any financial a  | ccounts or instr                                  | ruments he              | eld in your name, or for y                           | our benef              | it, closed,                             |
|     |  | lude checking, savings, money market, o<br>uses, pension funds, cooperatives, assoc<br>No                                       |  |   |                         | it; shares in banks, cred                            | it unions, l           | brokerage                               |
|     |  | Yes. Fill in the details.   |  |   |                         |  |                        |   |
|     |  | nme of Financial Institution and Idress (Number, Street, City, State and ZIP de)  | Last 4 digits of account number                                      | Type of acco instrument                           | unt or                  | Date account was closed, sold, moved, or transferred |                        | ast balance<br>e closing or<br>transfer |
| 21. |  | you now have, or did you have within 1 y<br>sh, or other valuables?   | ear before you filed fo  | r bankruptcy, a                                   | ny safe de <sub>l</sub> | posit box or other depos                             | sitory for s           | ecurities,                              |
|     |  | No<br>Yes. Fill in the details.   |  |   |                         |  |                        |   |
|     |  | nme of Financial Institution<br>Idress (Number, Street, City, State and ZIP Code)   | Who else had ac<br>Address (Number, State and ZIP Code)              |   | Describe                | the contents   | Do yo                  | ou still<br>it?                         |
| 22. |  |   |  |   |                         |  |                        |   |
|     |  | No  |  |   |                         |  |                        |   |
|     |  | Yes. Fill in the details.   |  |   |                         |  |                        |   |
|     |  | nme of Storage Facility Idress (Number, Street, City, State and ZIP Code)   | Who else has or<br>to it?<br>Address (Number,<br>State and ZIP Code) |   | Describe                | the contents   | Do yo                  | ou still<br>it?                         |
| Pa  | t 9:   | Identify Property You Hold or Control   | for Someone Else   |   |                         |  |                        |   |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. |   |  |   |                         |  |                        |   |
|     |  | No<br>Yes. Fill in the details.   |  |   |                         |  |                        |   |
|     | _  | vner's Name<br>Idress (Number, Street, City, State and ZIP Code)  | Where is the pro<br>(Number, Street, City,<br>Code)                  |   | Describe                | the property   |                        | Value                                   |
| Pa  | t 10   | Give Details About Environmental Info   | ormation   |   |                         |  |                        |   |
| For | the  | purpose of Part 10, the following definition  | ons apply:   |   |                         |  |                        |   |
|     | tox  | vironmental law means any federal, state, ic substances, wastes, or material into the ulations controlling the cleanup of these | ne air, land, soil, surfac   | e water, ground                                   |                         |  |                        |   |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

to own, operate, or utilize it, including disposal sites.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Phillip David Brendle

| 24. | Has any governmental unit notified you that   | e under or in violation of an environme                                   | ental law?                             |   |  |  |  |
|-----|---|---|--|---|--|--|--|
|     | ■ No □ Yes. Fill in the details.  |   |  |   |  |  |  |
|     | Name of site  | Governmental unit   | Environmental law if you               | Date of notice  |  |  |  |
|     | Address (Number, Street, City, State and ZIP Code)  | Address (Number, Street, City, State an ZIP Code)                         | Environmental law, if you know it      | Date of notice  |  |  |  |
| 25. | Have you notified any governmental unit of  | any release of hazardous material?  |  |   |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |  |   |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | Environmental law, if you know it      | Date of notice  |  |  |  |
| 26. | Have you been a party in any judicial or adn  | ninistrative proceeding under any env                                     | ironmental law? Include settlements a  | and orders.   |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |  |   |  |  |  |
|     | Case Title<br>Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nature of the case                     | Status of the case  |  |  |  |
| Par | 11: Give Details About Your Business or   | Connections to Any Business   |  |   |  |  |  |
| 27. | Within 4 years before you filed for bankrupt  | cy, did you own a business or have ar                                     | ny of the following connections to any | / business?   |  |  |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time |   |  |   |  |  |  |
|     | ☐ A member of a limited liability comp  | any (LLC) or limited liability partnersh                                  | nip (LLP)                              |   |  |  |  |
|     | ☐ A partner in a partnership  |   |  |   |  |  |  |
|     | ☐ An officer, director, or managing executive of a corporation  |   |  |   |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation                                 |   |  |   |  |  |  |
|     | ☐ No. None of the above applies. Go to F  | Part 12.  |  |   |  |  |  |
|     | Yes. Check all that apply above and fill  | in the details below for each business                                    | S.                                     |   |  |  |  |
|     | Business Name   | Describe the nature of the business                                       |  | Employer Identification number  |  |  |  |
|     | Address<br>(Number, Street, City, State and ZIP Code)   | Name of accountant or bookkeeper  |  | Do not include Social Security number or ITIN.  Dates business existed  EIN: None |  |  |  |
|     | ABP Painting  | Painting  |  |   |  |  |  |
|     | 335 Brown St.   | T diffitting  |  |   |  |  |  |
|     | Wauconda, IL 60084  |   | F10111-10 2015                         | From-To 2015  |  |  |  |
|     | Within 2 years before you filed for bankrupt<br>institutions, creditors, or other parties.                    | to anyone about your business? Inclu                                      | ude all financial                      |   |  |  |  |
|     | No  |   |  |   |  |  |  |
|     | Yes. Fill in the details below.   |   |  |   |  |  |  |
|     | Name<br>Address<br>(Number, Street, City, State and ZIP Code)   | Date Issued   |  |   |  |  |  |
|     |   |   |  |   |  |  |  |

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☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-21524 Doc 1 Filed 07/01/16 Entered 07/01/16 14:05:46 Desc Main Document Page 41 of 43

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

| In re | Phillip David Brendle  |   | Case No.  |  |    |
|-------|--|---|---|--|----|
|       |  | Debtor(s)   | Chapter   | 7  | _  |
|       | DISCLOSURE OF COMPEN   | SATION OF ATTO  | RNEY FOR DE   | CBTOR(S)                                 |    |
|       | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of  | of the petition in bankruptcy,  | or agreed to be paid  | to me, for services rendered or to       |    |
|       | For legal services, I have agreed to accept  |   | \$  | 949.00                                   |    |
|       | Prior to the filing of this statement I have received  |   | \$  | 949.00                                   |    |
|       | Balance Due  |   |   | 0.00                                     |    |
| 2.    | The source of the compensation paid to me was:   |   |   |  |    |
|       | ■ Debtor □ Other (specify):  |   |   |  |    |
| 3.    | The source of compensation to be paid to me is:  |   |   |  |    |
|       | ■ Debtor □ Other (specify):  |   |   |  |    |
| 4.    | ■ I have not agreed to share the above-disclosed comper  | sation with any other person  | unless they are members   | pers and associates of my law firm       | n. |
|       | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name  |   |   |  |    |
| 5.    | In return for the above-disclosed fee, I have agreed to reno   | der legal service for all aspect  | s of the bankruptcy c   | ase, including:                          |    |
|       | a. Analysis of the debtor's financial situation, and renderic.  Preparation and filing of any petition, schedules, staten Representation of the debtor at the meeting of creditors  [Other provisions as needed]  Negotiations with secured creditors to recreaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house | nent of affairs and plan which<br>and confirmation hearing, and<br>duce to market value; exc<br>as needed; preparation  | n may be required;<br>and any adjourned hear<br>emption planning;   | rings thereof; preparation and filing of |    |
| б.    | By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding.  | loes not include the following hargeability actions, judi   | g service:<br>cial lien avoidance                                   | es, relief from stay actions o           | r  |
|       |  | CERTIFICATION   |   |  |    |
|       | I certify that the foregoing is a complete statement of any a ankruptcy proceeding.  | agreement or arrangement for  | payment to me for re  | epresentation of the debtor(s) in        |    |
| _     | uly 1, 2016<br>ate   | Is/ Michael T. Bar<br>Michael T. Barret<br>Signature of Attorne<br>James D. Huls &<br>530 Rockland Ro<br>Crystal Lake, IL 6<br>815-455-4755 Fa<br>michael@jdhuls.<br>Name of law firm | t, Sr. 6200869<br>y<br>Associates<br>ad<br>60014<br>x: 815-455-5718 |  |    |

### **United States Bankruptcy Court** Northern District of Illinois

| In re | Phillip David Brendle                        |   | Case No.      |                           |  |  |  |
|-------|--|---|---------------|---------------------------|--|--|--|
|       |  | Debtor(s)   | Chapter       | 7                         |  |  |  |
|       | VERIFICATION OF CREDITOR MATRIX              |   |               |                           |  |  |  |
|       |  | Number of Co  | reditors: _   | 8                         |  |  |  |
|       | The above-named Debtor(s) h (our) knowledge. | hereby verifies that the list of creditor                           | s is true and | correct to the best of my |  |  |  |
| Date: | July 1, 2016                                 | /s/ Phillip David Brendle Phillip David Brendle Signature of Debtor |               |                           |  |  |  |

AT&T P.O. Box 8100 Aurora, IL 60507

City of Rolling Meadows C/O Armor Systems Co. 2322 N. Green Bay Road Waukegan, IL 60087

Santander Consumer P.O. Box 961245 Fort Worth, TX 76161

Village of Island Lake C/O TEK Collect 871 Park St. Columbus, OH 43215

Village of Lakemoor C/O MCSI Inc. P.O. Box 327 Palos Heights, IL 60463

Village of Lakemoor C/O MCSI Inc. P.O. Box 327 Palos Heights, IL 60463

Village of Lakemoor C/O MCSI Inc. P.O. Box 327 Palos Heights, IL 60463

Village of Lakemoor C/O MCSI Inc. P.O. Box 327 Palos Heights, IL 60463